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DEPARTMENT OF THE ARMY
UNITED STATES ARMY RESEARCH LABORATORY
2800 POWDER MILL ROAD
ADELPHI, MARYLAND 20783-1197

Declaration and Power of Attorney for Original Application

Docket No.: ARL 98-68D

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below), or an original, first and joint inventor (if plural names are listed below) of the subject matter, which is claimed and for which a patent is sought on the invention entitled

Method of Fabricating a Colossal Magneto-Resistive Detector Using a Thin Film Transfer Method

The specification of which is attached hereto;

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims;

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56;

No foreign applications for a patent or inventor's certificate have been filed.

POWER OF ATTORNEY: I hereby certify that the Government of the United States of America, as represented by the Secretary of the Army, has an assignment in the invention set forth in this application, and give irrevocable control of this application for Letters Patent to the Government of the United States, as represented by the Secretary of the Army, and appoint the following attorneys and all registered patent attorneys and agents hereinafter associated with Customer Numbers 21364, Army Research Laboratory; and 37064, Office of Command Counsel, U.S. Army Materiel Command to transact all business in the United States Patent and Trademark Office connected therewith:

William V. Adams	32,552	(703 806-8255)	William W. Randolph	28,986	(703 806-8254)
Stephen M. Bloor	39,612	(301 394-1595)	Edward L. Stolarun	25,515	(703 806-8244)

ADDRESS ALL TELEPHONE CALLS TO William V. Adams (Phone numbers are listed above)
ADDRESS ALL CORRESPONDENCE TO: U.S. Army Research Laboratory,
ATTN: AMSRD-ARL-CS-CC-IP (C. Bourget), 2800 Powder Mill Road, Adelphi, MD 20783-1197

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME of SOLE or FIRST INVENTOR: Meimei Z. Tidrow
RESIDENCE: Annandale, VA CITIZENSHIP: USA
POST OFFICE ADDRESS: 4643 Aspen Hill Court, Annandale, VA 22003
DATE: _____
SIGNATURE: _____

NOTE NEW
ADDRESS FOR
INVENTOR #1
SEE ATTACHED
ORIGINAL DECLARATION
AND POWER OF ATTORNEY
PLUS REVOCATION AND
NEW POWER OF
ATTORNEY
WILLIAM V. ADAMS
22 MARCH 2004
REG # 32,552

Docket No.: ARL 98-68D

FULL NAME OF SECOND INVENTOR: Steven Tidrow
RESIDENCE: Silver Spring, MD CITIZENSHIP: USA
POST OFFICE ADDRESS: 14105 Castle Blvd., Apt 303, Silver Spring, MD 20783-1197
DATE: _____
SIGNATURE: _____

FULL NAME OF THIRD INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: _____
POST OFFICE ADDRESS: _____
DATE: _____
SIGNATURE: _____

FULL NAME OF FOURTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: _____
POST OFFICE ADDRESS: _____
DATE: _____
SIGNATURE: _____

FULL NAME OF FIFTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: _____
POST OFFICE ADDRESS: _____
DATE: _____
SIGNATURE: _____

FULL NAME OF SIXTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: _____
POST OFFICE ADDRESS: _____
DATE: _____
SIGNATURE: _____

NOTE NEW ADDRESS
FOR INVENTOR #2
SEE ATTACHED ORIGINAL
DECLARATION AND POWER
OF ATTORNEY PLUS
REVOCATION AND NEW
POWER OF ATTORNEY
IN PARENT CASE
WILLIAM V. ADAMS
REG # 32,552
22 MARCH 2004

DEPARTMENT OF THE ARMY
UNITED STATES ARMY RESEARCH LABORATORY
2800 POWDER MILL ROAD
ADELPHI, MARYLAND 20783-1197

Declaration and Power of Attorney: Original Application

Docket No. ARL 98-68

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below), or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method of Fabricating a Ferroelectric/Pyroelectric Infrared Detector Using a Crystallographically Oriented Electrode and a Rock Salt Structure Material substrate

The specification of which is attached hereto;

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims;

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56;

No foreign applications for a patent or inventor's certificate have been filed.

POWER OF ATTORNEY: I hereby certify that the Government of the United States of America, as represented by the Secretary of the Army, has an assignment in the invention set forth in this application, and give irrevocable control of this application for Letters Patent to the Government of the United States, as represented by the Secretary of the Army, and appoint the following attorneys to transact all business in the Patent and Trademark Office connected therewith:

Mr. Paul S. Clohan, Jr. Reg. No.: 33, 369

Mr. Mark D. Kelly, Reg. No.: 39,467

ADDRESS ALL TELEPHONE CALLS TO Mark D. Kelly (301) 394-1584

ADDRESS ALL CORRESPONDENCE TO: U.S. ARMY Research Laboratory, ATTN: AMSRL-CS-CC-IP, 2800 Powder Mill Rd., Adelphi, MD 20783-1197

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME of SOLE or FIRST INVENTOR: Meimei Tidrow

RESIDENCE: Silver Spring, MD

CITIZENSHIP: USA

POST OFFICE ADDRESS: 14539 Cutstone Way, Silver Spring, MD 20905

Date: 4-12-00

SIGNATURE: _____

[Handwritten Signature]

FROM
PARENT CASE
SEE ADDRESS
CHANGE
W. Adams
REG. # 32552
22 MAR 2004

Docket No.: ARL 98-68

FULL NAME OF SECOND INVENTOR: Steven Tidrow
RESIDENCE: Silver Spring, MD CITIZENSHIP: USA
POST OFFICE ADDRESS: 2537 Glenallan Ave, Apt. 4, Silver Spring, MD 20906
Date: 11 April 2000
SIGNATURE: Steven Tidrow

FULL NAME OF THIRD INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: USA
POST OFFICE ADDRESS: _____
Date: _____
SIGNATURE: _____

FULL NAME OF FOURTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: USA
POST OFFICE ADDRESS: _____
Date: _____
SIGNATURE: _____

FULL NAME OF FIFTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: USA
POST OFFICE ADDRESS: _____
DATE: _____
SIGNATURE: _____

FULL NAME OF SIXTH INVENTOR: _____
RESIDENCE: _____ CITIZENSHIP: USA
POST OFFICE ADDRESS: _____
DATE: _____
SIGNATURE: _____

FROM PARENT CASE
SEE ADDRESS CHANGE
William V. Adams
REG # 32,552
22 MARCH 2004

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PTO/SB/02 (10-00)

Approved for use through 10/31/2002. OMB (0551-0035)

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/550,623
Filing Date	4/17/00
First Named Inventor	Tidrow, et al
Group Art Unit	3724
Examiner Name	T. Eley
Attorney Docket Number	ARL 98-68

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ Please change the correspondence address for the above-identified application to:☐ Customer Number

OR

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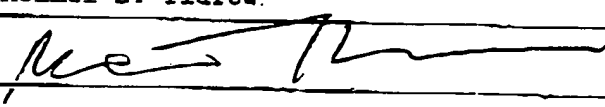
<input checked="" type="checkbox"/> Firm or Individual Name	William V. Adams, William W. Randolph & Edward L. Stolarun				
Address					
Address					
City					
Country		State		ZIP	
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Meimei Z. Tidrow
Signature	
Date	9-2-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/550,623
Filing Date	4/17/00
First Named Inventor	Tidrow, et al
Title	Method of Fabricating a-
Group Art Unit	3724
Examiner Name	T. Eley
Attorney Docket Number	ARL 98-68

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:Place Customer
Number Bar Code
Label here

Name	Registration Number
William V. Adams	32,552
William W. Randolph	28,986
Edward L. Stolarun	25,515

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

OR

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Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).
SIGNATURE of Applicant or Assignee of Record

Name Meimei Z. Tidrow

Signature 

Date 9-2-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted

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PTO/SB/81 (02-01)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/550,623
Filing Date	4/17/00
First Named Inventor	Steve Tidrow
Title	Method of Fabricating a-
Group Art Unit	3724
Examiner Name	T. Eley
Attorney Docket Number	ARL 98-68

I hereby appoint:

☐ Practitioners at Customer Number →

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Number Bar Code
Label here

☒ Practitioner(s) named below:

Name	Registration Number
William V. Adams	32,552
William W. Randolph	28,986
Edward L. Stolarun	25,515

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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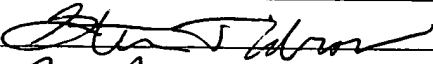
I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Steven Tidrow
Signature	
Date	24 August 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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PTO/SB/82 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number 09/550,623

Filing Date 4/17/00

First Named Inventor Tidrow, et al

Group Art Unit 3724

Examiner Name T. Eley

Attorney Docket Number ARL 98-68

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ Please change the correspondence address for the above-identified application to:

☐ Customer Number



Place Customer
Number Bar Code
Label here

OR

☒ Firm or
Individual Name

William V. Adams, William W. Randolph & Edward L. Stolarun

Address

Address

City

Country

State

ZIP

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Steven Tidrow

Signature

Steven Tidrow

Date

21 August 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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